## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09748758

		_	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY						
TOTAL CLAIMS							ſ	RATE	FEE	ſ	RATE	FEE
FOR the state of t			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	23 min	us 20=	• 7	3		X\$ 9=		OR	X\$18=	854
IND	EPENDENT CL	AIMS	6 mi	6 minus 3 = 3				X40=		OR	X80=	240
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	( '
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1004	
CLAIMS AS AMENDED - PART II									ļ	J	OTHER	THAN
(Column 2) (Column 3)								SMALL E		OR.	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus 🚡	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDEN	I CLAIM		J	+135=		OR	+270=	
The same of the sa							3	TOTAL		OR	TOTAL	•
ADDIT. F (Column 1) (Column 2) (Column 3)											ADDIT. FEE	•
		. CLAIMS		HIGH	HEST		ו ר		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	-	= PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	A STATE OF THE STA	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	I have	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	*	0.0	+270=	
Annual Control of the							l	TOTAL		OR	TOTAL	
			منيور.			-		ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	4					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus '	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤	+135=				
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	·
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	ber Previously Pai	d For" (Total or	Independ	lent) is the	highest numb	er fou	nd in the app	ropriate box	in co	lumn 1.	